

3 ug/ml) against oxidized low-density lipoprotein (ox-LDL)-induced Human umbilical vein endothelial cells (HUVECs) dysfunction in vitro.

METHODS In vivo, obesity-related hypertensive rat models were induced by high-fat diet for 25 weeks. The aqueous extract of TT and telmisartan was intragastrically administered for 8 weeks. Body weight, blood pressure and heart rate were measured weekly to observe the slimming benefits and anti-hypertensive effects of the drugs. The endothelial morphology of the thoracic aorta was observed by HE staining and scanning electron microscope. The level of serum lipid was measured by biochemical methods, and serum leptin, AngII, ET-1, NO, NPY and Hcy was determined by ELISA. In vitro, HUVECs were pre-incubated for 60 min with TT (30 ug/ml and 3 ug/ml separately) or 10-5 mol/l telmisartan and then the injured endothelium model was established by applying 100 ug/ml ox-LDL for 24 h. Cell viability of HUVECs was observed by real-time cell electronic sensing assay and apoptosis rate by Annexin V/PI staining. The cell migration assay was performed with a Transwell insert system. Cytoskeleton remodeling was observed by immunofluorescence assay. The content of eNOS was measured by ELISA. Intracellular reactive oxygen species (ROS) generation was assessed by immunofluorescence and flow cytometer. Key genes associated with the metabolism of ox-LDL were chosen for quantitative real-time PCR to explore the possible mechanism of TT against oxidized LDL-induced endothelial dysfunction.

RESULTS TT decreased systolic pressure, diastolic pressure, mean arterial pressure and heart rate, and showed against weight gain effect. TT improved endothelial integrity of thoracic aorta, decreased leptin, AngII, ET-1, NPY and Hcy, while increased NO.

In vitro, TT suppressed ox-LDL-induced HUVEC proliferation and apoptosis rates significantly and TT prolonged the HUVEC survival time and postponed the cell's decaying stage. TT improved the endothelial cytoskeletal network and increased cell migration. Additionally, TT regulated of the synthesis of endothelial nitric oxide synthase and generation of intracellular reactive oxygen species. TT significantly decreased mRNA expression of PI3K α and Socs3. It also increased mRNA expression of Akt1, AMPK α 1, JAK2, LepR and STAT3 induced by ox-LDL. The results suggested that the JAK2/STAT3 and/or PI3K/AKT pathway may be a very important pathway of the pharmacological mechanism of TT against endothelium injury.

CONCLUSIONS TT demonstrated excellent slimming benefits, anti-hypertension and endothelial protective effects. It also suggested that the JAK2/STAT3 and/or PI3K/AKT pathway might be a very important pathway which was involved in the pharmacological mechanism of TT as the vascular protective agent.

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Cardiac Fibroblast Contributes to Myocardial Fibrosis in Mice With Diabetes Mellitus-Role of Cardiomyocyte-Fibroblast Interaction

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OBJECTIVES The major cardiac cell type expressing HMGB1 is the cardiac myocyte (CM) while the primary IL-33 expressing cell is the cardiac fibroblast (CF). Here we delineated the extracellular communication pathway between cardiomyocyte and fibroblast that contributes to murine DiCM.

METHODS DM was induced in 6-week-old, male C57BL/6 mice by intraperitoneal (i.p.) injection of streptozotocin (STZ). The sex matched littermates were injected with an equal volume of citrate buffer as controls (pH=4.5). CMs or CFs cultured individually or in co-culture were challenged with 30 mM glucose in M199 to simulate the hyperglycemia of DM. As an osmotic control, the cells were incubated with 30 mM mannitol in M199. Immunofluorescence staining and Western blot were used for assessment of protein expression of HMGB1, IL-33 and collagen I and III. A mouse pressure-volume loop analysis system was used for assessment of myocardial function.

RESULTS 1) myocardial expression of HMGB1 and IL-33 were detected by immunofluorescence staining and Western blot in the murine STZ model of DM. Myocardial expression of HMGB1 was increased, while that of IL-33 was decreased at 2 and 4 weeks after achieving a hyperglycemic state. HMGB1 was primarily localized to the myocytes, while IL-33 was localized to the interstitial fibroblasts.

2) Mice developed cardiomyopathy six weeks after the induction of DM as indicated by increased myocardial fibrosis and dysfunction.

The myocardial collagen deposition and improvement of myocardial function were substantially attenuated by inhibition of HMGB1 or exogenous IL-33.

3) Although challenge of isolated CFs with HG increased HMGB1 production, the effects were minimal compared to those noted in CM. In vitro HG model, cardiac myocytes can potentiate the down-regulation of IL-33 in CFs; an effect mediated by myocyte-derived HMGB1.

4) HG challenge of CFs alone slightly increased collagen I expression. The effect was significantly enhanced when CFs were co-cultured with CMs; the potentiating effect was abrogated by the HMGB1 inhibitor, A-box. Further, increase in collagen I expression by isolated CFs in response to HG, was potentiated by exogenous administration of HMGB1.

5) When TLR4^{-/-} CFs were co-cultured with wild type CMs, the CM-induced potentiating effect on down-regulation of CF IL-33 and increase in CF collagen production was negated. Two weeks after the induction of the STZ model, the expected decrease in IL-33 was noted in WT mice, but it was not evident in TLR4^{-/-} mice. Further, in TLR4^{-/-} mice, the STZ-induced myocardial fibrosis and dysfunction were blunted.

CONCLUSIONS Our data support that cardiac myocyte-fibroblast interaction plays a key role in diabetic myocardial fibrosis. Specifically, our study indicates myocyte HMGB1-fibroblast TLR4/IL-33 axis contributes to the development of myocardial fibrosis and dysfunction in mice with diabetes.

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Postinfarction Gene Therapy With Hepatocyte Growth Factor Mitigates Cardiac Remodeling and Dysfunction

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OBJECTIVES To investigated beneficial effects and its mechanisms of naked plasmid expressing recombinant human hepatocyte growth factor on left ventricular remodeling and dysfunction.

METHODS Acute myocardial infarction was induced male SD rats by ligating anterior descending of left coronary artery. These rats were randomly assigned to HGF group (n=8); a single myocardial injection of naked plasmid expressing HGF (250 ug/injection) immediately after left coronary artery ligation. Control group (n=8); myocardial injection of same dose naked plasmid without HGF, normal group (n=10); the suture was passed but not tied treated. After four or eight weeks, cardiac function was evaluated by echocardiography respectively, the cardiac specimens at eight-week time point were subjected to Masson staining and immunohistochemical analysis.

RESULTS Four weeks later, left ventricular remodeling and dysfunction were apparent, and LV anterior wall thickness (LVAWT) were significantly reduced (P<0.001) in the control group. However, left ventricular remodeling and dysfunction were significantly relieved (p<0.05) and LVAWT were thicker (p=0.378) in the HGF group. Eight weeks later, HGF-treated rats showed that left ventricular remodeling and dysfunction were still significantly improved (p<0.05), furthermore, significant mitigation of LVAWT was seen in HGF-treated rats (P<0.05). Eight weeks later, the infarct size significantly reduced and the infarct wall was thicker in the HGF-treated rats (P<0.05). Myocardial fibrosis was significantly reduced and the density of blood capillary was significantly increased in the myocardial infarcted area in HGF group (P<0.001)

CONCLUSIONS Recombinant human hepatocyte growth factor improves postinfarction cardiac remodeling and dysfunction by reducing infarct size and myocardial fibrosis and increasing by density of blood capillary.

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Diabetes Blunt the Compensatory Enhancement of SUMOylation Intensity of Sarcoplasmic Reticulum Calcium-transporting ATPase After Myocardial Infarction

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OBJECTIVES Diabetes is an independent risk factor of heart failure and mortality after myocardial infarction(MI). The activity and